POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).								
I hereby appoint:								
OR		sociated with the Cust		800		en a cı] ustomer numb	er must be used):
	Name		Registration Number		Name			Registration Number
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).								
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 86636								
OR Firm or								
Individual Name								
Address								
City	City		State		Zip			
Country			Telephon	е	Em	ail		
Assignee Name and Address:								
Tab Two Limited Liability Company 160 Greentree Drive Suite 101 Dover, Delaware 19904								
filed in each ap the practitione	pplications appoint	gether with a stateme in in which this form i inted in this form if th application in which th	s used. The s e appointed p	statement under 37 ractitioner is autho	CFR 3.7 rized to	3(b) m	ay be compl	eted by one of
SIGNATURE of Assignee of Record The individual whese signature and title is supplied below is authorized to act on behalf of the assignee								
Signature		Sor	$\overline{}$		Date	2	-15-2	U12
Name	1	en Finley				one		
Title	Autho	horized Person for Tab Two Limited Liability Company						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION REGARDING AUTHORITY TO SIGN ON BEHALF OF A LEGAL ENTITY (37 C.F.R. 3.73(b)(2)(i))

I, Stephen Finley (whose title is supplied below), hereby declare that I am authorized to sign on behalf of Tab Two Limited Liability Company.

Stephen Finley, Authorized Person

2-15-2012

[date]